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CONFIRMATION NO. 2119

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/663,225	<b>FILING OR 371(c) DATE</b> 09/16/2003 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3736	<b>ATTORNEY DOCKET NO.</b> 63116-00006USPT
<b>APPLICANTS</b> Kenneth R. Stott, Sugar Land, TX; Robert L. Stott, Sugar Land, TX;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/466,313 04/29/2003 and is a CIP of 10/439,958 05/15/2003 which claims benefit of 60/383,303 05/23/2002 and claims benefit of 60/466,313 04/29/2003				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> ** 12/10/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 36	<b>TOTAL CLAIMS</b> 50
Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>INDEPENDENT CLAIMS</b> 3		
<b>ADDRESS</b> 24238				
<b>TITLE</b> User interface for automated diagnostic hearing test				
<b>FILING FEE RECEIVED</b> 935	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	